# 122000297410

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



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### FLORIDA DEPA TMENT OF STATE DIVISION OF ORPORATIONS

Attached is a form to convert an "Other Business Entity "into a "Florida Limited Liability Company" pursuant to section 605.1045, Florida Statutes. These forms are basic and may not meet all conversion needs. The advice of an attorney is recommended.

Pursuant to s. 605.0102(23)a, F.S., entity means: a business corporation, a nonprofit corporation, a general partnership, including a limited liability partnership, including a limited partnership, including a limited liability limited partnership: a limited liability company: a real estate investment trust: or any other domestic or foreign entity that is organized under an organic law.

\$150.00 (\$25 for Articles of Conversion and Filing Fees:

\$125 for Articles of Organization)

Certified Copy (optional): \$30.00

Certificate of Status (optional): \$5.00

Send one check in the total amount payable to the Florida Department of State.

Please include a cover letter containing your telephone number, return address and certification requirements, o complete the attached cover letter.

### **Mailing Address:**

New Filing Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

### Street Address:

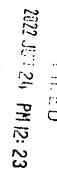
New Filing Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

For further information, you may contact the New Filing Section at (850) 245-6052.

Important Notice: As a condition to the conversion, pursuant to s.605.0212(9), F.S., each party to the conversion must be active and current through December 31 of the calendar year this document is being submitted to the Department of State for filing.

INHS11 (7/17)



# **COVER LETTER**

<b>TO:</b> New Filing Section Division of Corporations		
SUBJECT: Corporate Air Charters, LL	.C	
(Name	of Resulting Florida Limi	nited Company)
		tion, and fees are submitted to convert an "Otheny" in accordance with s. 605.1045, F.S.
Please return all correspondence con-	cerning this matter to:	
Tiffany Sopczak		
(Contact Person	)	_
Corporate Air Charters, LLC		
(Firm/Company	)	2022
13955 SW 127 Street		
(Address)		- - 22 日
Miami, FL 33186		7022 JUN 24 PH 12: 23
(City, State and Zip	Code)	72
tsopczak@propelaviation.com		14 N
E-mail Address: (to be used for future an	nnual report notifications)	_
For further information concerning the	his matter, please call:	:
Tiffany Sopczak	at ( <sup>305</sup>	) 255-5077
(Name of Contact Person)		e) (Daytime Telephone Number)
Enclosed is a check for the following dollars and drawn on a bank located		processed by this office must be payable in US
S150.00 Filing Fees (\$25 for Conversion & \$125 for Articles of Organization)  \$\begin{array}{l} \$155.00 Filing and Certificate of Status \end{array}		
Mailing Address: New Filing Section		Street Address: New Filing Section
Division of Corporations		Division of Corporations
P.O. Box 6327		The Centre of Tallahassee
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## **Articles of Conversion**

For

### "Other Business Entity"

Into

## Florida Limited Liability Company

The Articles of Conversion <u>and attached Articles of Organization</u> are submitted to convert the following "Other Business Entity" into a Florida Limited Liability Company in accordance with s.605.1045, Florida Statutes.

1. The name of the "Other Business Entity" immediately prior to the filing of the Articles of Conversion is:  Corporate Air Charters, Inc.
(Enter Name of Other Business Entity)
2. The "Other Business Entity" is a
(Enter entity type. Example: corporation, limited partnership, general partnership, common law or business trust, et
First organized, formed or incorporated under the laws of
(Enter state, or if a non-U.S. entity, the name of the country)
08/24/1994 on
(date of organization, formation or incorporation)
3. The name of the Florida Limited Liability Company as set forth in the attached Articles of Organization
Corporate Air Charters, LLC
(Enter Name of Florida Limited Liability Company)
4. If not effective on the date of filing, enter the effective date:
(The effective date: Cannot be prior to date of receipt or filed date nor more than 90 calendar days after
the date this document is filed by the Florida Department of State.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.
5. The plan of conversion has been approved in accordance with all applicable statutes.
6. The "Converted or Other Business Entity" has agreed to pay any members having appraisal rights the amount to

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which such members are entitled under ss. 605.1006 and 605.1061-605.1072. F.S.

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Signed this 14 day of June	20 <u>Z2</u>			
Signature of Authorized Representative of L	X 3 1			
Signature of Authorized Representative: Harman Printed Name: Tiffany Sopozak	Title: Agsounting Manager			
Signature(s) on behalf of Other Business Entit	y: [See below for required signature(s)]			
Signature: Printed Name: Joel Valle	Title: Managing Member, Propel Aviation			
Signature:				
Printed Name:	Title:			
Signature:Printed Name:	Title:			
Signature:Printed Name:	Title:	•		
Timed Name.				
Signature: Printed Name:	Title:	•		
Signature:				
Printed Name:	Title:	•		
If Florida Corporation: Signature of Chairman, Vice Chairman, Director If Directors or Officers have not been selected, a  If Florida General Partnership or Limited Lia Signature of one General Partner.	n Incorporator must sign.			
If Florida Limited Partnership or Limited Lia Signatures of ALL General Partners.				
All others: Signature of an authorized person.		٠	2022 Ju	
Fees:	•	· -	21	
Articles of Conversion: Fees for Florida Articles of Organizatio Certified Copy: Certificate of Status:	\$25.00 on: \$125.00 \$30.00 (Optional) \$5.00 (Optional)	The Control of the Co	PH 12: 23	E D

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the L	imited Liability Company i	is:	
Corporate Air Chart			<del></del>
(M	ust contain the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")	
ARTICLE II - Ac The mailing addre		principal office of the Limited	l Liability Company
Principal Office A	Address:	Mailing Address:	
13955 SW 127th St	reet	13955 SW 127th Street	
Miami, FL 33186		Miami, FL 33186	
ARTICLE III - R	Registered Agent, Register	ed Office, & Registered Age	nt's Signature:
(The Limited Liability C business entity with an	Company cannot serve as its own Rej active Florida registration.)	gistered Agent. You must designate an ir	adividual or another
The name and the	Florida street address of th	e registered agent are:	2022 JUN 24
	Propel Aviation Sales & Se	rvices, LLC	· · · · · · · · · · · · · · · · · · ·
	Na	me	24 PI
	12800 SW 139th Ave		유민
	Florida street address (P	.O. Box NOT acceptable)	ED PH 12: 23
	Miami	FL 33186	芸品。
	City	Zip	

is:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605. F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

### ARTICLE IV-

Joel Valle

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager			
MGR	Propel Aviation Sales & Services, LLC		
	12800 SW 139th Ave		
	Miami, FL 33186		
<del></del>	<del></del>		
	702		
(Use attachment if necessary)			
(Suc attachment in no cosmig)	24		
	24 <b>PP</b>		
TICLE V: Other provisions, if any.	PH 12: 23		
•	2:		
	23		
	<u>.</u>		
REQUIRED SIGNATURE:			
(	/ z/K		
	(104-		
Signature of a member or	an authorized representative of a member		
This document is executed in accordance	with section 605.0203 (1) (b), Florida Statutes. I am aware that ment to the Department of State constitutes a third degree felon		

Typed or printed name of signee

# Filing Fees

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)